

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Cruz for President**

**A. Full Name (Last, First, Middle Initial)**

**SAM KINSEY**

Mailing Address 1749 ARROWWOOD WAY

City

LIBERTYVILLE

State

IL

Zip Code

60048-9486

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PSI

Occupation

SALES

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

**Transaction ID : SA17.1021425**

Date of Receipt

M M / D D / Y Y Y Y  
01 / 30 / 2016

**CONTRIBUTION**

Amount of Each Receipt this Period

25.00

**B. Full Name (Last, First, Middle Initial)**

**TIMOTHY J. KINSMAN**

Mailing Address 309 E. DESERT PARK LN.

City

PHOENIX

State

AZ

Zip Code

85020-4032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

NONE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1550.00

**Transaction ID : SA17.1018187**

Date of Receipt

M M / D D / Y Y Y Y  
01 / 30 / 2016

**CONTRIBUTION**

Amount of Each Receipt this Period

300.00

**C. Full Name (Last, First, Middle Initial)**

**MR. LARRY KINZIE**

Mailing Address 637 RIVERSIDE DR.

City

NEW BRAUNFELS

State

TX

Zip Code

78130-3635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

**Transaction ID : SA17.1018918**

Date of Receipt

M M / D D / Y Y Y Y  
01 / 30 / 2016

**CONTRIBUTION**

Amount of Each Receipt this Period

25.00

**Subtotal Of Receipts This Page (optional)**.....

350.00

**Total This Period (last page this line number only)**.....